

Best Available Copy

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 09/318,614	FILING DATE 5/26/99
CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1		1				
2			1				
3			1				
4			1				
5			1				
6			1				
7			1				
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49							
50							
TOTAL IND.	2		2				
TOTAL DEP.	10	→	22	←			
TOTAL CLAIMS	12		24				